

JAMES E, RISCH – Governor RICHARD M. ARMSTRONG – Director DEBBY RANSOM, R.N., R.H.I.T - Chief BUREAU OF FACILITY STANDARDS 3232 Elder Street P.O. Box 83720 Boise, Idaho 83720-0036 PHONE: (208) 334-6626 FAX: (208) 364-1888 E-mail: fsb@idhw.state.id.us

August 24, 2006

Mary Totten, Administrator Countryside Living Center P.O. Box 239 Mackay, ID 83251

License #: RC-120

Dear Ms. Totten:

On July 10, 2006, a follow-up survey was conducted at Countryside Living Center. As a result of that survey, deficient practices were found. A deficiency was cited at the following level:

• Non-core issues, which are described on the Punch List, and for which you have submitted evidence of resolution.

This office is accepting your submitted evidence of resolution.

Should you have questions, please contact Debbie Sholley, L.S.W., Health Facility Surveyor, Residential Community Care Program, at (208) 334-6626.

Sincerely,

DEBBIE SHOLLEY, L.S.W.

Team Leader

Health Facility Surveyor

Residential Community Care Program

DS/sm

c:

Jamie Simpson, MBA, QMRP Supervisor, Residential Community Care Program



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July 24, 2006

FILE COPY

Mary Totten, Administrator Countryside Living Center Po Box 239 Mackay, ID 83251

Dear Ms. Totten:

On July 10, 2006, a follow-up visit to the standard health care survey survey of April 5, 2006, was conducted at Countryside Living Center. The core issue deficiencies issued as a result of the April 5, 2006, survey have been corrected.

Please bear in mind that non-core issue deficiencies were identified on the Punch List, a copy of which was reviewed and left with you during the exit conference. The completed Punch List form and accompanying proof of resolution (e.g., receipts, pictures, policy updates, etc.) are to be submitted to this office by August 9, 2006.

Should you have questions, please contact me at (208) 334-6626.

Debbie Sholley LEW for Jamie Simpson

Sincerely,

JAMIE SIMPSON, BS, QRMP, MBA

Supervisor

Residential Community Care Program

JS/slc

c: Melanie Belnap, Program Manager, Regional Medicaid Services, Region VII – DHW Debra Ransom, R.N., R.H.I.T., Chief, Bureau of Facility Standards



FACILI BUREAU OF FACILITY STANDARDS P.O. Box 83720 Boise, ID 83720-0036 (208) 334-6626 fax: (208) 364-1888

Non-Core Issues Punch List **ASSISTED LIVING**

(208) 588-2400 ZIP Code 7/10/01/7 Phone Number \$ 3251 Survey Date RECE 4433 Beverland Road Follow-up Survey Mackay Survey Type Physical Address Country Side Living Center Mary Jane Totten Survey Team Leader Debbie Sholley NON-CORE ISSUES Facility Name

| | 8/10/04 / Mary Hang Maller |
|---|---|
| | Response Required Date Signature of Fagility Representative |
| *************************************** | |
| *************************************** | |
| | |
| 7-28-06 000 | SEE ATTACKED INVOICE F |
| | WEST TWO WEEKS. TRYGHTEL |
| | WILL DE WERKTHANED AND INSTANTED IN THE |
| | ARRIVED THE CINDERPHOLK HOUSE. They |
| | 1150, ON 7-26-06 OUR WEW OAK doors |
| | 184 45 follow up 3URVEY |
| | Photo's Attached of RESOLUTION, COMPLETED SAME |
| | |
| 90-01-2 | for resident's privacy. |
| | communial bathroom did not have closes on bathroom stalls to provide |
| | center block house: I resident room did not have a door and the |
| | 16.03.22.550.02 The facility did not powide accomodation for residents privacy in the |
| DATE RESOLVED | # DESCRIPTION |

9/04